

PREPARED STATEMENT OF

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on

Preparing Early, Acting Quickly:

Meeting the Needs of Older Americans During a Disaster

Before the

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I. Introduction

Good morning Chairman Smith, Ranking Member Kohl, and members of the Special Committee on Aging. I want to thank you for the opportunity to testify before this esteemed committee. My name is Carolyn Wilken and I am an associate professor and Cooperative Extension specialist in gerontology at the University of Florida. It is in my role as a specialist with the Florida Cooperative Extension Service that I speak to you today. The Cooperative Extension Service (CES) is a partnership between land grant universities such as the University of Florida (<http://ifas.ufl.edu>), the United States Department of Agriculture-Cooperative State Research Extension and Education Service (CSREES) (<http://www.csrees.usda.gov/>), and county governments. CES federal, state and county partnerships exists in all states and U.S. territories. The mission of Cooperative Extension is to provide scientific knowledge and expertise to the public through non-resident educational programs. The Florida Extension Service is positioned within the Institute of Food and Agricultural Sciences, or IFAS at the University of Florida (<http://ifas.ufl.edu>) and serves each of the state's 67 counties by providing information and conducting educational programs on issues that affect the daily lives of Floridians, including hurricane preparedness and recovery.

II. Disasters Disproportionately Impact Older Americans

News that a hurricane, flood, wildfire or other natural disaster, as well as concerns about a terrorist attack can cause anyone to worry, but such disasters create special challenges for older adults. While ‘younger’ older adults and those who have strong family support system can evaluate an emergency situation and react quickly and independently; others who are older, frail, ill, confused, alone, or institutionalized are at

serious risk of injury or death when disaster strikes. In fact, we know that in previous national disasters such as floods, hurricanes, tornadoes and earthquakes, the elderly comprise more than fifty-percent of all fatalities.

Many of these fatalities can be directly linked to various chronic and acute medical concerns or the direct impact of the disaster itself. These deaths, while tragic have an underlying and understandable cause: “in the midst of the chaos she forgot to take her medicine, her blood pressure shot up and she suffered a fatal stroke”, “they were killed when they came in contact with a downed power line”, or “she died because she didn’t have a ride to the evacuation center and couldn’t walk that far in the flood waters.”

Yet we also know that far too many older Americans die for reasons that are not clearly evident or easily understood. Although the research into older adults and disasters is limited, anecdotal reports suggest that in times of disaster older adults, particularly the very old, tend to respond differently to disasters than the general population. In lieu of the fact that we are anticipating the aging of the baby boomer generation, the needs to address these issues are only going to grow.

III. Life-Views of Older Adults

Since published empirical studies of older adults and disasters are limited, we can begin to understand their responses to disasters by exploring how they respond to other types of crises such as serious illness. This can provide us with a basic understanding from which to begin building age-sensitive communication and evacuation strategies.

This generation of older adults recently referred to as the *Greatest Generation*, possess a strong sense of independence and self-reliance accompanied by a reluctance to accept help. Many attach a stigma to government assistance, relating it to welfare. They

have experienced multiple losses in their lives;—the deaths of spouses, friends, and sometimes children. As a result, the possibility of losing one’s home and the memories attached to it may be more than they want to bear. Many older adults have lived in the same place for many years and feel a strong attachment to their homes, particularly in times of stress. During life-ending illnesses, they turn to hospice to help them die at home, surrounded by their memories, and the people and things they love.

Older adults also express what some would consider fatalistic views of life. In times of serious illness older adults talk openly about death and may use the same language when faced with a disaster. These feelings are expressed in statements such as “I’ve lived a good life, and I’m ready to die”, “I’d rather die here than go someplace where I don’t know anybody”, “This is my home, this is where I raised my kids. My wife died here and all my memories are in this house. I’d prefer to stay”, and “My pets are all the family I have left, if they don’t go, I don’t go.”

For other older adults, refusal to evacuate may be based on fear of the unknown rather than attachment to home. At home, they can manage their physical health and functional disabilities such as incontinence. For many, the prospect of living in close quarters with strangers, and using a public restroom which may be located several yards from the older adult’s designated sleeping area is more terrifying than the prospect of dying at home.

A nurse from Gainesville, Florida who traveled to Mississippi to provide emergency care described why older adults refused to evacuate.

“ Seniors are very attached to their homes, and especially their pets, perhaps more than younger folks... Their [older adults] possessions, or even the place where their possessions remain often take on such a special significance that it is

impossible to coax seniors into evacuation. It is, after all, their connection to the past. They are often unwilling to part with their things for that reason. This is more than hanging on to ‘things’. This is about hanging on to memories, and the accomplishments of their lives. Sometimes it is the substance of what they have to remind them of who they were, and are.” Gino Newman, 2005

Fear related to evacuation also involves fear of the transportation provided for evacuation. Older adults may be worried that they cannot physically ‘climb’ onto the bus or that the bus will not stop in time for them to get to the bathroom when necessary. They may be afraid that the transportation does not have the medical support equipment they need. They may be hesitant to enter the evacuation transportation system because they don’t know where the bus is taking them—“what if I’m on the wrong bus” and they worry about how they will get back home once the disaster is over. Some people may simply refuse to board the bus when they learn that pets are not allowed or they learn that they cannot bring their valued possessions with them.

There are many factors related to older adults that influence their response during a disaster. It is imperative that professionals who are responsible for planning and providing for at risk older adults demonstrate their respect for the unique life-views of older adults by incorporating their understanding of those views into their programming.

IV. Strategies That Respect the Life-Views of Older Adults: Communication

Strategies Influence Successful Evacuations

Older Floridians and the service providers who plan for and implement disaster strategies have had too many opportunities to learn about disasters. If experience is the best teacher, then Florida has been an attentive student. The programs I will now describe are only representative of the many excellent ways that the people in agencies and organizations across Florida demonstrate respect for older Floridians.

Written Communication Two key Florida agencies, the Cooperative Extension Service and the Department of Elder Affairs communicate with older adults about disaster preparedness and disaster recovery through written publications and personal contact. The publications I describe here are included in the materials you were provided prior to this testimony.

The Cooperative Extension fact sheets titled *Preparing for a Disaster: Strategies for Older Adults* and *After the Hurricanes Have Gone...* and the Department of Elder Affairs comprehensive publication *2005 Disaster Preparedness Guide for Elders* provide elders with the information they need to make informed, independent decisions concerning disasters, and demonstrate respect for independence and self-reliance. The CES fact sheets are available on-line through the EDIS system (Extension Data Information Source) (<http://edis.ifas.ufl.edu>) or in hard copy at the county Extension office. County CES programs also offer localized information on their websites. The Sarasota county Extension web site offers an excellent example (<http://sarasota.extension.ufl.edu/hurricane-info2.htm>).

The Department of Elder Affairs hurricane disaster guide is available on-line through the DOEA website (<http://elderaffairs.state.fl.us>), is distributed in hard copy through an extensive mailing list and is delivered to senior gathering places across the state.

Personal Communication Face-to-face programs, and even personal phone calls establish relationships between service providers and older adults and build trust which is vital when disaster strikes. Each year the Alachua County Extension office offers a program titled *Countdown to Hurricane Season* to older adults at meal sites and

other local gathering places. Personal relationships between home care providers, case workers and eldercare also provide older adults with trusted professionals they can turn to in a disaster.

The Florida Keys was recently evacuated, and personal communication was central to the successful evacuation of older adults. Utilizing a strategy devised by DOEA (see the DOEA Disaster Response Flow Chart, included in your packet) and utilized across the state, at-risk older adults were contacted by phone to assess their evacuation plans and needs. A minimum of three follow-up phone calls were made when necessary to assure that each person was given the opportunity to evacuate. Individuals were told where they would be taken and how they would be returned to their homes. Appropriate transportation for evacuation was arranged for each evacuee that included busses for those who could physically endure the ride to the mainland, and ambulances that were brought in from south Florida to transport those with complex medical needs.

Seminole county utilizes a similar process. Law enforcement officers travel door-to-door to reach people on the sheriff's list of persons in need of special assistance. At the same time, senior volunteers answer phone calls to answer specific questions concerning the evacuation process. Unlike a mass media broadcast 'to evacuate,' it is through personal communication that these professionals and volunteers are able to respond to questions and fears about the evacuation process and to alleviate concerns about leaving one's home.

Collaboration Leads to Effective Disaster Response

Effective disaster response requires the collaborative efforts of numerous groups who stay in constant communication during every phase of a disaster. In Seminole county

for example, the Sheriff's Department/TRIAD and the Seminole Community Volunteer Program/RSVP work collaboratively with American Red Cross, Salvation Army, Sheriff's Department, Emergency Management, Cooperative Extension Service and Health Department. In Hernando county the collaboration includes emergency management, Red Cross, the Health Department and Cooperative Extension. Similar collaborations occur at the state level where broad policy development and state-wide planning occurs.

Communication Training

Volunteers, first responders, the military, transportation providers, and others who work with older adults benefit from special communication training. Two Extension fact sheets provide information for communicating with individuals and with groups. *Stop, Look, and Listen* is a simplistic strategy for communicating effectively with older adults in one-to-one settings. *Designing Educational Programs for Older Adults* offers detailed instructions for communicating with groups of older adults; and would be extremely useful for those who work with groups of older adults in a Disaster Recovery Center.

Transportation providers who often have initial contact with evacuees, as well as other providers will find their greatest challenges associated with communicating with older adults who are confused due to Alzheimer's or related dementia producing diseases. When someone who is confused enters the transportation system they may become lost to their caregivers and families. More specialized communication training can be offered to prepare all providers to deal with such issues.

Successful communication depends as well on speaking the native language of evacuees. This is particularly true with working with older adults who may not have

learned English or may return to their native language under times of severe stress. While it is well known that evacuation centers offer translators and native speakers, those who have first contact with older evacuees (i.e. first responders, transportation providers) need the support of a translator in the field.

V. Ethical Issues Related to Communication and Evacuation

Professionals and volunteers who are communicating with older adults during times of crisis can easily become single-minded as they work diligently to protect the older adults for whom they feel responsible. Stress and time pressures may influence the communicator's tone of voice or the amount of pressure they apply when trying to coax an older adult into evacuation. An ethical dilemma arises when older adults choose to make an informed decision not to evacuate when the position of the emergency workers is that everyone must evacuate.

Further discussion among ethicists and specialists in emergency management, psychology, and gerontology is needed immediately to examine the ethical issues imbedded in mandatory evacuations, particularly as related to older, frail adults. Such discussions can lead to informed policy development that can be implemented at the time of a disaster, protecting those in charge from the overwhelming responsibility of making an ethical decision under duress.

VI. A Florida Strategy to Develop a National System of Best Practices for Serving Older Adults When Disaster Strikes

In order to best serve and protect older Americans in the event of a natural disaster or act of terrorism it is imperative to develop a national plan for disaster preparation and response that reflects and responds to elder specific characteristics and

concerns. The first step in the development of this plan would be to hold an inter-agency, multi-state best practices conference to identify, refine, and disseminate information and strategies for working with older adults when disaster strikes. Participants in planning and attending this conference would be drawn from the coastal states whose recent experiences with hurricanes have provided them with fresh knowledge of what worked, and what is still needed to help older Americans prepare and act quickly in the face of disaster.

This conference would generate:

- 1) Educational programs for older adults, their caregivers, and their families about how to prepare for and respond to a disaster,
- 2) Training materials and prepared seminars about working with older adults for those who have direct contact with older adults at each phase of a disaster,
- 3) A set of documents that are consistent across state lines and use consistent terminology,
- 4) A communication strategy specifically designed to reach older adults to assist them in the preparation and recovery stages, and when necessary, the evacuation stage of a disaster, and
- 5) Guidelines for safely and securely transporting older adults when an evacuation order is issued.

It is clear that the most effective strategies for preparing and caring for older adults at all levels are the result of the collaborative efforts of key stakeholders.

Therefore, it is recommended that this conference be planned and implemented by a team

of professionals from at least these entities: the Aging Network, Cooperative Extension System, Medicare/Medicaid, Emergency Management, and appropriate health related providers (i.e. the health care and pharmacy industry), long-term care providers and agencies that arrange and provide transportation. The conference planners would develop an advisory board of consultants as needed, including a number of older adults who have personal experiences with disasters. At the conclusion of this conference, conference planners and others would develop a strategy to integrate the best practices and other findings of the conference into a service manual to disseminate through an on-going, interactive website focused on disaster issues. This website would be accessed by those who provide for older Americans and older Americans themselves. Related print materials, in several languages would be prepared for distribution throughout the system.

Conclusion

Thank you for the opportunity to testify at this hearing. I would be more than happy to answer your questions today or to follow up with additional information at the completion of today's proceedings.